



U.S. Department
of Transportation
**Federal Aviation
Administration**

Advisory Circular

**Subject: CERTIFICATION OF A REPAIRMAN
(GENERAL)**

Date: 2/1/83
Initiated by: AWS-340

AC No: 65-24
Change:

1 **PURPOSE.** This advisory circular (AC) provides information and guidance to the aviation public on the procedures for certification of a repairman. It also introduces a new concept for certification, wherein formal training may be substituted for experience.

2. **RELATED FEDERAL AVIATION REGULATIONS (FAR).** FAR Part 65, Sections 65.1, 65.11, 65.13, 65.15, 65.101, 65.103, 65.104, and 65.105; FAR Part 121, Sections 121.371, and 121.709; FAR 127, Sections 127.135, 127.319; FAR Part 135, Sections 135.429, and 135.443; FAR Part 145, Sections 145.41, 145.61, and 145.103. Federal Aviation Act of 1958, as amended, Section 602.

3. **RELATED MATERIAL.** AC 65-23, Certification of Repairmen (Experimental Aircraft Builders). Copies of this AC may be obtained by writing to the U.S. Department of Transportation, Publications Section, M-443.1, Washington, D.C. 20590.

4. **BACKGROUND.** FAR Part 65, Subpart E, provides the regulatory requirements for certification of repairmen. Due to a recent regulatory change, it has become necessary to provide a step-by-step procedure for certification of a repairman.

5. **GENERAL.** An applicant for a repairman certificate will normally be employed by a certificated repair station, manufacturer's maintenance facility, or a certificate holder operating under the provisions of FAR Parts 121, 127, or 135, and are not required to take a written, oral, or practical test.

a. When an applicant is employed by a certificate holder operating under the provisions of FAR Parts 121, 127, or 135 and that certificate holder operates a certificated repair station, the applicant will need only a single repairman certificate provided the ratings are identical for both organizations.

b. A repairman may be employed by more than one repair station. In this case the person will need a separate repairman certificate for each repair station if they are different companies.

c. An applicant for a repairman certificate who is employed by a person holding an air carrier operating certificate should be assigned to a ~~position~~ in which he/she is responsible for the work of a shop or department that performs maintenance; be authorized to perform required inspections or be authorized to sign the airworthiness release or log entry required by Sections ~~121.709, 127.319, or 135.443.~~

d An applicant for a repairman certificate who is employed by a certificated repair station or manufacturer's maintenance facility should be at ~~or~~ above the level of shop foreman or department head and should be directly in charge of the maintenance function for which he/she is certificated.

6. ELIGIBILITY. To be eligible for a repairman certificate each applicant ~~is required~~ by Section ~~65.101~~ to:

a. Be at least 18 years of age;

b Be specially qualified to perform maintenance ~~on~~ aircraft ~~or~~ components thereof, appropriate to the job for which he/she is ~~employed~~;

c. Be employed for a specific job requiring those special qualifications by a certificated repair station, manufacturer's maintenance facility, or ~~by~~ a certificated commercial operator or certificated air carrier, that is required ~~by~~ its operating certificate or approved operations specification~~&.~~ to provide a ~~continuous~~ airworthiness maintenance program ~~according~~ to its maintenance manuals;

d Be recommended for certification ~~by~~ his/her employer, to the satisfaction of the Administrator, as ~~able to~~ satisfactorily maintain aircraft or ~~components~~, appropriate to the job for which he/she is employed;

e. Have one of the following:

1 Have at least 18 months of practical experience in the procedures, practices, inspection methods, materials, tools, machine tools, and ~~equipment~~ generally used in the maintenance duties of the specific job for which he/she is employed and certificated: ~~or~~

2 Complete formal training that is acceptable to the Administrator, and is specifically designed to qualify the applicant for the job in which the applicant is to be ~~employed~~; ~~and~~

f Be able to read, write, speak, and understand the English language, ~~or~~, in the case of an applicant who does not meet these requirements and who is employed outside the United States ~~by~~ a certificated repair station, a certificated U.S. ~~commercial~~ operator, or a certificated U.S. air carrier, described in paragraph c, have his/her ~~certificate~~ endorsed Valid only outside the United States."

7. EXPERIENCE. The 18 months of practical experience required for certification of a repairman should not be computed from experience gained as a student

mechanic. Practical ~~experience should~~ be documented through the use of employment ~~records~~ or military ~~service~~ records that ~~show~~ in detail the specialized ~~experience~~ gained in the specific job ~~for~~ which the repairman applicant applies.

8. TRAINING IN LIEU OF EXPERIENCE. In the past, the only ~~means~~ of ~~obtaining~~ a repairman ~~certificate~~ was ~~by~~ presentation of a letter of ~~recommendation~~ ~~from~~ the repair station, ~~manufacturer's maintenance~~ facility, or person ~~holding~~ an air carrier ~~operating~~ certificate ~~indicating~~ that the applicant has had at least 18 months of specialized ~~experience~~ in the specific job in which he/she is to be employed. A new ~~concept~~ has been introduced which provides for certification of repairmen ~~utilizing~~ formal ~~training~~ that is ~~acceptable~~ to the Administrator in lieu of ~~experience~~. Formal ~~training acceptable~~ to the Administrator includes:

a. Current specialized ~~formal training~~ for a specific job when it is ~~accomplished~~ by the manufacturer of the product or by an FAA ~~certificated~~ agency such as a repair station or the ~~holder~~ of an air carrier ~~operating~~ certificate, or aviation ~~maintenance~~ technician school, or an accredited college or university.

b. Training which has been submitted to the Flight ~~Standards~~ field office ~~having~~ jurisdiction over the area in which the ~~training~~ is to be conducted, and found ~~acceptable~~. The ~~training~~ should contain the following:

(1) A ~~complete~~ curriculum for the specialized ~~training to be given~~.

(2) A ~~breakdown of the number of~~ hours to be spent in training including a breakdown of the hours spent in a classroom ~~and~~ the hours spent in a ~~shop or laboratory~~.

(3) A breakdown of the grading system to be used ~~and~~ a schedule of phase ~~testing and final testing~~.

(4) A method of ~~showing~~ that a student has ~~successfully completed~~ the ~~current~~ specialized ~~training~~, including the ~~number of hours~~ the student ~~completed and~~ the student's ~~final~~ examination grade.

c. ~~Training~~ given on a ~~continuing~~ basis ~~need be submitted~~ to the Flight Standards field office ~~having~~ jurisdiction over the ~~training~~ facility only ~~once~~ for evaluation ~~unless~~ substantial curriculum charges are made at a later date.

d. ~~Training~~ conducted at a training facility under a controlled ~~environment~~ should be designed so that a majority ~~of~~ the ~~training~~ time is spent in shop or laboratory ~~instruction~~.

e. ~~Training~~ conducted in ~~accordance~~ with a curriculum and designed so that it will ~~encompass~~ all of the basic knowledge required ~~for~~ the specialized job function ~~for~~ which the ~~training~~ is given should include the ~~procedures, practices,~~ inspection methods, materials, ~~tools, machine tools, and equipment~~ normally used in the ~~maintenance~~ function of the specific job ~~for~~ which the

training was ~~conducted~~. This training should not be mistaken for training obtained for a mechanic certificate with an airframe or powerplant rating and should not be ~~confused~~ with on-the-job-training.

9. RATINGS. Repairman ratings should coincide with the specialized skill or talent required for the specific job for which the person is employed to perform or supervise. In no case will a repairman certificate be issued to circumvent an applicant obtaining a mechanic certificate with appropriate ratings.

a. When employed by a certificated repair station, the repairman rating should coincide only with the ratings held ~~by~~ the repair station which require specialized training such as gyro instruments, propeller overhaul, argon ~~heliarch~~ welding, nondestructive testing, etc.

b. ~~When~~ employed by a person holding an air carrier operating ~~certificate~~, the repairman ratings should correspond to the speciality or ~~shop~~ in which they perform or supervise, such as, hydraulic ~~component~~ overhaul, landing gear overhaul, special inspections, turbine disc overhaul, etc.

10. REPAIRMAN PRIVILEGES. The holder of a repairman certificate ~~employed by~~ a certificated repair station, a manufacturer's maintenance facility, or the holder of an air carrier operating certificate may perform or supervise the maintenance, preventive maintenance, or alteration of aircraft or . . . ; aircraft components appropriate to the job for which the repairman was employed and certificated. Unless the repairman understands the current instructions of the ~~certificate~~ holder by whom he/she is ~~employed~~ and the manufacturer's instructions for continued airworthiness, that person may not perform or supervise duties under his/her repairman certificate. A certificated repairman employed by a person holding an air carrier operating certificate ~~may~~ sign the release or entry only for the work for which he/she is employed and certificated as required by Sections ~~121.709(b)(3), 127.319(b)(3), and 135.443(b)(3).~~

11. APPLICATION PROCEDURE For each repairman rating desired an applicant ~~should~~ submit:

a. An original of FAA Form **8610-2**, Airman Certificate and/or Rating Application, with all appropriate items in Sections I through IV ~~completed~~. The repairman box should be checked on the top of the form and the rating sought should be typed underneath. Figures **1, 2, and 3** illustrate a properly completed form.

b. A letter of ~~recommendation~~ is required ~~from~~ the applicant's ~~employer~~ for ~~each~~ rating for which application is made. The letter of ~~recommendation~~ should clearly state that the applicant ~~meets~~ the requirements of Sections **65.101, 145.39, 145.41, and 145.43**. The letter of ~~recommendation~~ should clearly state the specialized job the applicant will perform or supervise,

the total amount of experience or training the applicant has in the specialized job and a statement that the repair station or person holding an air carrier operating certificate has a need for the applicant as a repairman.

Note: In remanding to the Administrator, the repair station, **manufacturer's** maintenance facility, or person holding an air carrier operating certificate should **recommend** only qualified person(s) that have the required experience or specialized training for the specialized job for which they are to be employed.

c. The Federal Aviation Act of **1958**, Title VI, Section **602**, provides for the **Administrator** to issue airman certificates specifying the capacity in which the airman is authorized to serve, if the Administrator finds, after investigation, that the applicant for an airman certificate possesses the proper qualification and is physically able to perform the duties of the certificate desired. Investigation by the Administrator could entail a thorough **check** of the applicant's employment **records**, military **records**, formal training **records**, or direct testing to assure that the applicant has the required experience or formal training for the specialized repairman rating applied for.

12. APPLICATION DISAPPROVAL. If an applicant for a repairman certificate is disapproved, the application and letter of **recommendation** will be returned to the applicant. The returned documents will be accompanied by a letter of explanation to the applicant and will explain the exact portions of the **FAR** that the applicant did **not** meet.

13. REISSUANCE OR CHANGE IN RATING. When the application is for **reissuance** or a change in rating, the certificate number, date of issue, and appropriate ratings will be transcribed to the appropriate spaces on the temporary certificate exactly as they appear on the holder's Airman Certificate, AC Form **8060-1**. The superseded certificate will be attached to the application and forwarded with the file.

14 SURRENDERED CERTIFICATES. When a repairman is relieved **from**, or no longer performs the duties for which he/she was employed, the repairman **certificate** is no longer effective and must, under Section **65.15(d)**, be returned to the Administrator.



M. C. Beard
Director of Airworthiness

AC 65-24
Appendix 1

TEAR OFF BEFORE USE	DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION	SUPPLEMENTAL INFORMATION																																
AIRMAN CERTIFICATE AND/OR RATING APPLICATION-PRIVACY ACT																																		
<p>This supplements the form appearing below: Airman Certificate and/or Rating Application</p> <p>The information on the form is submitted under authority of the Federal Aviation Regulations, Part 65</p> <p>Submission of all the data is mandatory except for Social Security Account Number which is voluntary</p> <p>The purpose of this information is to establish eligibility for certification and/or airman rating</p> <p>This data will be used to identify and evaluate your qualifications and eligibility for the issuance of an airman certificate and/or rating</p> <p>Certification cannot be completed unless the data is complete</p> <p>Disclosure of your Social Security Account Number is optional. Disclosure will facilitate maintenance of your records which are maintained in alphabetical order and cross referenced with your SSAN and airman number to provide prompt access. In event of nondisclosure a unique number will be assigned to your file.</p>																																		
FAA Form 8610-2 (10-76) THIS PART SUPERSEDES FAA FORM 8000-33																																		
<i>Detach this part before using form below</i>																																		
No certificate may be issued unless it is completed & application form has been received (14C.F.R. 65) Form Approved OMB No. 04-R006																																		
DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION																																		
AIRMAN CERTIFICATE AND/OR RATING APPLICATION																																		
<input type="checkbox"/> MECHANIC <input checked="" type="checkbox"/> AIRFRAME <input type="checkbox"/> POWERPLANT	<input checked="" type="checkbox"/> REPAIRMAN Propeller (Specify Rating)	<input type="checkbox"/> PARACHUTE RIGGER <input type="checkbox"/> SENIOR <input type="checkbox"/> SEAT <input type="checkbox"/> BACK <input type="checkbox"/> MASTER <input type="checkbox"/> CHEST <input type="checkbox"/> LAP																																
APPLICATION FOR <input checked="" type="checkbox"/> ORIGINAL ISSUANCE <input type="checkbox"/> ADDED RATING																																		
I. APPLICANT INFORMATION	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4">A NAME (First Middle Last) Charles Earl Merritt</td> </tr> <tr> <td>B SOCIAL SECURITY NO 102-14-8391</td> <td>C DOB (Mo., Day, Yr.) 2-17-41</td> <td>D HEIGHT 76 IN</td> <td>E WEIGHT 165</td> </tr> <tr> <td>F HAIR Brown</td> <td>G EYES Brown</td> <td>H SEX M</td> <td>I NATIONALITY U.S.A</td> </tr> <tr> <td colspan="2">J PLACE OF BIRTH Hawthorne, N.Y.</td> <td colspan="2">K PERMANENT MAILING ADDRESS NUMBER AND STREET • • BOX ETC 3149 Cornell Lane Alexandria, VA 22303 COUNTY Fairfax</td> </tr> <tr> <td colspan="2"> L HAVE YOU EVER HAD AN AIRMAN CERTIFICATE DENIED, SUSPENDED, OR REVOKED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES → If "Yes," explain on an attached sheet taping to appropriate item number </td> <td colspan="2"> M DO YOU NOW OR HAVE YOU EVER HELD AN FAA AIRMAN CERTIFICATE? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY TYPE </td> </tr> <tr> <td colspan="4"> N HAVE YOU EVER BEEN CONVICTED FOR VIOLATION OF ANY FEDERAL OR STATE STATUTES PERTAINING TO NARCOTIC DRUGS, MARIJUANA, AND DEPRESSANTS OR STIMULANT DRUGS OR SUBSTANCES? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES → </td> </tr> </table>		A NAME (First Middle Last) Charles Earl Merritt				B SOCIAL SECURITY NO 102-14-8391	C DOB (Mo., Day, Yr.) 2-17-41	D HEIGHT 76 IN	E WEIGHT 165	F HAIR Brown	G EYES Brown	H SEX M	I NATIONALITY U.S.A	J PLACE OF BIRTH Hawthorne, N.Y.		K PERMANENT MAILING ADDRESS NUMBER AND STREET • • BOX ETC 3149 Cornell Lane Alexandria, VA 22303 COUNTY Fairfax		L HAVE YOU EVER HAD AN AIRMAN CERTIFICATE DENIED, SUSPENDED, OR REVOKED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES → If "Yes," explain on an attached sheet taping to appropriate item number		M DO YOU NOW OR HAVE YOU EVER HELD AN FAA AIRMAN CERTIFICATE? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY TYPE		N HAVE YOU EVER BEEN CONVICTED FOR VIOLATION OF ANY FEDERAL OR STATE STATUTES PERTAINING TO NARCOTIC DRUGS, MARIJUANA, AND DEPRESSANTS OR STIMULANT DRUGS OR SUBSTANCES? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES →											
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II. CERTIFICATE OR RATING BASIS OF —	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> A CIVIL EXPERIENCE</td> <td><input type="checkbox"/> B MILITARY EXPERIENCE</td> <td><input checked="" type="checkbox"/> C LETTER OF RECOMMENDATION FOR REPAIRMAN (Attach copy)</td> </tr> <tr> <td><input type="checkbox"/> D GRADUATE OF APPROVED COURSE</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> E STUDENT HAS MADE SATISFACTORY PROGRESS AND IS RECOMMENDED TO TAKE THE ORAL/PRACTICAL TEST (FAA 85-80)</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> F SPECIAL AUTHORIZATION TO TAKE MECHANIC'S ORAL/PRACTICAL TEST (FAA 85-80)</td> <td colspan="2"></td> </tr> </table>		<input type="checkbox"/> A CIVIL EXPERIENCE	<input type="checkbox"/> B MILITARY EXPERIENCE	<input checked="" type="checkbox"/> C LETTER OF RECOMMENDATION FOR REPAIRMAN (Attach copy)	<input type="checkbox"/> D GRADUATE OF APPROVED COURSE			<input type="checkbox"/> E STUDENT HAS MADE SATISFACTORY PROGRESS AND IS RECOMMENDED TO TAKE THE ORAL/PRACTICAL TEST (FAA 85-80)			<input type="checkbox"/> F SPECIAL AUTHORIZATION TO TAKE MECHANIC'S ORAL/PRACTICAL TEST (FAA 85-80)																						
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		PACKED AS A: <input type="checkbox"/> SENIOR RIGGER <input type="checkbox"/> MILITARY RIGGER																																
IV. APPLICANT'S CERTIFICATION																																		
I CERTIFY THAT THE STATEMENTS BY ME ON THIS APPLICATION ARE TRUE SIGNATURE: Charles E. Merritt			DATE: 1-2-85																															
FOR FM USE ONLY																																		

FIGURE 22. AIRMAN CERTIFICATE AND/OR RATING APPLICATION

TEAR OFF BEFORE USE		DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION		SUPPLEMENTAL INFORMATION	
AIRMAN CERTIFICATE AND/OR RATING APPLICATION-PRIVACY ACT					
<p>THIS supplement to the form appearing below, Airman Certificate and/or Rating Application.</p> <p>The information on the form is submitted under authority of the Federal Aviation Regulations, Part 65.</p> <p>Submission of all the data is mandatory except for Social Security Account Number which is voluntary.</p> <p>The purpose of this information is to establish eligibility for certification and/or airman rating.</p> <p>It shall be used to identify and evaluate your qualifications, and eligibility for the issuance of an airman certificate and/or rating.</p> <p>Certification cannot be completed unless the data is complete.</p> <p>Disclosure of your Social Security Account Number is optional. Disclosure will facilitate maintenance of your records which are maintained in alphabetical order and cross referenced with your SSAN and airman number to provide prompt access. In event of nondisclosure a unique number will be assigned to your file.</p>					
FAA FORM 8610-2 (11/81) THIS FORM SUPERSEDES FAA FORM 8000-33					
Detach this part before using form below					
<p>No certificate can be issued unless completed and application form has been received by FAA (FAR 65)</p> <p style="text-align: right;">Form Approved OMB No. 04 R0065</p>					
AIRMAN CERTIFICATE AND/OR RATING APPLICATION					
<p><input checked="" type="checkbox"/> SENIOR <input type="checkbox"/> REPAIRMAN <input type="checkbox"/> PARACHUTE RIGGER</p> <p><input type="checkbox"/> AIRFRAME <input checked="" type="checkbox"/> Nondestructive Testing <input type="checkbox"/> SEAT <input type="checkbox"/> CHEST <input type="checkbox"/> LAP</p> <p>Application FOR <input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> ISSUANCE <input type="checkbox"/> ADDED RATING <input type="checkbox"/> SACK</p>					
I. APPLICANT INFORMATION	A. NAME (First, Middle, Last) Ina Good Mech			K. PERMANENT MAILING ADDRESS NUMBER AND STREET BOX ETC 4931 Cora Court CITY STATE ZIP CODE Silver Spring, Md 22001	
	B. SOCIAL SECURITY NO. 201-41-1938			C. DOB (Mo, Day, Yr.) 2-17-41	
	D. HEIGHT 66 IN			E. WEIGHT 165	
	F. HAIR Brown			G. EYES Brown	
II. CERTIFICATE OR RATING APPLIED FOR ON BASIS OF	H. PLACE OF BIRTH Hawthorne, N.Y.			I. NATIONALITY U.S.A.	
	L. HAVE YOU EVER HAD AN AIRMAN CERTIFICATE DENIED, SUSPENDED OR REVOKED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			M. DO YOU NOW OR HAVE YOU EVER HELD AN FAA AIRMAN CERTIFICATE? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	
	N. HAVE YOU EVER BEEN CONVICTED FOR VIOLATION OF ANY FEDERAL OR STATE STATUTES PERTAINING TO NARCOTIC DRUGS, MARIJUANA AND DEPRESSANT OR STIMULANT DRUGS OR SUBSTANCES? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			DATE OF FINAL CONVICTION	
	O. A. CIVIL EXPERIENCE <input type="checkbox"/> GRADUATE OF APPROVED COURSE 0			B. MILITARY EXPERIENCE <input checked="" type="checkbox"/> LETTER OF RECOMMENDATION FOR REPAIRMAN (attach copy)	
III. RECORD OF EXPERIENCE	P. STUDENT HAS MADE SATISFACTORY PROGRESS AND IS RECOMMENDED TO TAKE THE ORAL PRACTICAL TEST (FAA 65.80) 0			Q. SCHOOL NAME NO	
	R. SPECIAL AUTHORIZATION TO TAKE MECHANIC'S ORAL/PRACTICAL TEST (FAA 65.80) 0			S. DATE AUTH 0	
	T. DATE AUTH 0			U. DATE AUTH 0	
	V. DATE AUTH 0			W. DATE AUTH 0	
IV. APPLICANT'S CERTIFICATION	A. MILITARY COMPETENCE OBTAINED 0			B. SERVICE 0	
	C. RANK OF PAY LEVEL 0			D. MILITARY SPECIALTY CODE 0	
	E. APPLICANTS OTHER THAN FAA CERTIFICATED SCHOOL GRADUATES, LIST EXPERIENCE RELATING TO CERTIFICATE AND RATING APPLIED FOR (Continue on separate sheet if more space is needed)				
	F. DATES - MONTH AND YEAR FROM TO 1/79 1/81			G. EMPLOYER AND LOCATION Sandusky Airlines National Airport, Md.	
V. RECORD OF EXPERIENCE	H. TYPE WORK PERFORMED Nondestructive Testing of Critical Airframe Parts				
	I. BEAT 0			J. CHEST 0	
	K. BACK 0			L. LAP 0	
	M. PACKED AS A 0			N. SENIOR RIGGER 0	
VI. APPLICANT'S CERTIFICATION	O. SIGNATURE Ina Good Mech			P. DATE 2/1/83	
	Q. CERTIFY THAT THE STATEMENTS MADE ON THIS APPLICATION ARE TRUE				
	R. FOR FAA USE ONLY				
	S. LIMITATIONS				

FIGURE 3. AIRMAN CERTIFICATE AND/OR RATING APPLICATION

No certificate may be issued unless a completed application form has been received (14 C.F.R. 65).

Form Approved OMB No. 04-R0085

DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION															
AIRMAN CERTIFICATE AND/OR RATING APPLICATION															
<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> MECHANIC <input checked="" type="checkbox"/> AIRFRAME <input checked="" type="checkbox"/> POWERPLANT </div> <div> <input checked="" type="checkbox"/> REPAIRMAN Airframe (Fibre Composite) <div style="margin-top: 5px;">(Specify Rating)</div> </div> <div> <input type="checkbox"/> PARACHUTE RIGGER <input type="checkbox"/> SENIOR <input type="checkbox"/> SEAT <input type="checkbox"/> BACK <input type="checkbox"/> MASTER <input type="checkbox"/> CHEST <input type="checkbox"/> LAP </div> </div>															
APPLICATION FOR: <input checked="" type="checkbox"/> ORIGINAL ISSUANCE <input type="checkbox"/> RENEWED RATING															
I. APPLICANT INFORMATION	A. NAME (First, Middle, Last) Jane Marie Jones						K. PERMANENT MAILING ADDRESS NUMBER AND STREET, P.O. BOX, ETC. 4624 Kenfield Road								
	B. SOCIAL SECURITY NO. 018-81-6495		C. DOB (Mo., Day, Yr.) 3-17-40		D. HEIGHT 59 IN.		E. WEIGHT 105		CITY, STATE, ZIP CODE Columbus, Ohio 43221						
	F. HAIR Blonde	G. EYES Blue	H. SEX Female	I. NATIONALITY U.S.A.		COUNTY King									
	J. PLACE OF BIRTH Columbus, Ohio						M. DO YOU NOW OR HAVE YOU EVER HELD AN FAA AIRMAN CERTIFICATE? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES								
	L. HAVE YOU EVER HAD AN AIRMAN CERTIFICATE DENIED, SUSPENDED, OR REVOKED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 0 YES → If "Yes," explain on an attached sheet keying to appropriate item number						SPECIFY TYPE :								
N. HAVE YOU EVER BEEN CONVICTED FOR VIOLATION OF ANY FEDERAL OR STATE STATUTES PERTAINING TO NARCOTIC DRUGS, MARIJUANA, AND DEPRESSANT OR STIMULANT DRUGS OR SUBSTANCES? <input checked="" type="checkbox"/> NO 0 YES															
II. CERTIFICATE OR RATING APPLIED FOR ON BASIS OF -	0 A. CIVIL EXPERIENCE 0 B. MILITARY EXPERIENCE <input checked="" type="checkbox"/> C. LETTER OF RECOMMENDATION FOR REPAIRMAN (Attach copy)														
	0 D. GRADUATE OF APPROVED COURSE (1) NAME AND LOCATION OF SCHOOL														
	(2) SCHOOL NO. (3) CURRICULUM FROM WHICH GRADUATED (4) DATE														
	0 E. STUDENT HAS MADE SATISFACTORY PROGRESS AND IS RECOMMENDED TO TAKE THE ORAL/PRACTICAL TEST (FAR 65.80) (1) SCHOOL NAME NO. (2) SCHOOL OFFICIAL'S SIGNATURE														
	0 F. SPECIAL AUTHORIZATION TO TAKE MECHANIC'S ORAL/PRACTICAL TEST (FAR 65.80) (1) DATE AUTH. (2) DATE AUTH. EXPIRES (3) FAA INSPECTOR SIGNATURE (4) FAA DIST. OFC.														
III. RECORD OF EXPERIENCE	A. MILITARY COMPETENCE OBTAINED IN: (1) SERVICE (2) RANK OR PAY LEVEL (3) MILITARY SPECIALTY CODE														
	B. APPLICANTS OTHER THAN FAA CERTIFICATED SCHOOL GRADUATES, LIST EXPERIENCE RELATING TO CERTIFICATE AND RATING APPLIED FOR. (Continue on separate sheet if more space is needed)														
	DATES-MONTH AND YEAR		EMPLOYER AND LOCATION				TYPE WORK PERFORMED								
	FROM	TO													
	3/81	10/81	Gadboys Aircraft Company Municipal Airport Columbus, Ohio				Carbon Filament Molder								
C. PARACHUTE RIGGER APPLICANTS: INDICATE BY TYPE HOW MANY PARACHUTES PACKED															
SEAT CHEST BACK LAP FOR MASTER RATING ONLY <input checked="" type="checkbox"/> SENIOR RIGGER 0 MILITARY RIGGER															
IV. APPLICANT'S CERTIFICATION		I CERTIFY THAT THE STATEMENTS BY ME ON THIS APPLICATION ARE TRUE													
		A. SIGNATURE Jane Marie Jones								B. DATE 1/1/82					
FOR FAA USE ONLY															
Emp	reg	I.O.	seal	con	iss	Act	lev	TR	s.h.	Srch	etc	RATING (1)	RATING (2)	RATING (3)	RATING (4)
LIMITATIONS															

FAA Form 8610-2 (10-76) SUPERSEDES FAA FORM 8310-2 AND FAA FORM 8000-23

